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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/529,778	07/17/2000	MARINUS MARIAS BOONE	BO41592	3723

466 7590 06/08/2004

YOUNG & THOMPSON
745 SOUTH 23RD STREET 2ND FLOOR
ARLINGTON, VA 22202

EXAMINER

NI, SUHAN

ART UNIT	PAPER NUMBER
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2643

22

DATE MAILED: 06/08/2004

Please find below and/or attached an Office communication concerning this application or proceeding.

<p>Interview Summary</p>	Application No. 09/529,778	Applicant(s) BOONE ET AL.	
	Examiner Suhan Ni	Art Unit 2643	

All participants (applicant, applicant's representative, PTO personnel):

(1) Suhan Ni.

(3) Dr. Marinus M. Boone.

(2) Mr. Eric Jansen.

(4) Mr. Jacob van der Zwan.

Date of Interview: 03 June 2004.

Type: a) ☐ Telephonic b) ☐ Video Conference
 c) ☒ Personal [copy given to: 1) ☐ applicant 2) ☐ applicant's representative]

Exhibit shown or demonstration conducted: d) ☐ Yes e) ☒ No.

If Yes, brief description: _____.

Claim(s) discussed: 12.

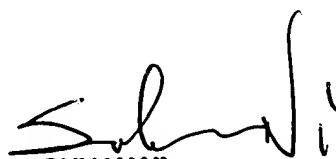
Identification of prior art discussed: ~095, ~078.

Agreement with respect to the claims f) ☒ was reached. g) ☐ was not reached. h) ☐ N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: The applicant will further amend the claim for overcoming the latest rejection, and the examiner will further consider a newly amended claim.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.


SUHAN NI
PRIMARY EXAMINER

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

Examiner's signature, if required